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MEMBERSHIP APPLICATION

The undersigned hereby applies for Membership in Printing Industries of St. Louis, Inc. (PISTL), combined with national membership in Printing Industries of America, Inc. (PIA) and AAIM Management Association (PISTL partner program). It is understood that membership makes available to our firm all the services maintained by PISTL / PIA / AAIM, and that membership may be terminated at any time with 30-days' written notice. We further agree that all dues and other moneys due will be paid in full to date of resignation. We agree to abide by the bylaws and policies of PISTL.

Membership Level: Active Associate Educational Limited In-Plant

Our desired dues payment frequency is monthly, quarterly, semi-annually, annually.

A **check** for \$_____, accompanies this application.

A **credit card** payment in the amount of \$_____, accompanies this application.

Credit Card: VISA MasterCard American Express

Card Number _____ Exp. Date _____

Bill me at the end of the month on your automatic membership dues billing cycle.

Firm Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Fax: _____

E-mail: _____ Website: _____

Authorizing Signature: _____

Signer's Name (please print): _____

Signer's Title (please print): _____

Predominant Line of Business: _____

Date of Application: _____